## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

108 01517

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS					(COI	(Column 2)		TYPE		OR			
			20		· .			RATE	FEE	╣.	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			≈ 0 minus 20=		*			X\$ 9=		OR	X\$18=		
╟	DEPENDENT (			ninus 3 =				X43=		OR	X86=		
L		NDENT CLAIM F	<del></del>					+145=		OR	+290=		
*	the difference	e in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	na		
	CLAIMS AS AMENDED - PART II									₹ .	OTHER		
(Column 1)			<del></del>	(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	01.4114	=		X43=		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
	•							TOTAL DDIT. FEE	<u> </u>	1, 1	TOTAL		
	(Column 1) (Column 2) (Column 3)									OR ,	ADDIT. FEE	•	
_	•	CLAIMS		HIGHE	ST	(Column 3)	F	··-	ADDI-		·	4001	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	ľ	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						F						
							L	+145=		OR	+290=		
								TOTAL DDIT, FEE		OR A	TOTAL DDIT. FEE		
<del>_</del>		(Column 1) CLAIMS		(Columi		(Column 3)		• • • •	· . · .				
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	7.10-		OR	700=		
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
H	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT, FEE		
Ť	he *Highest Num	ber Previously Paid	For (Total or	Independent	ess than t) is the l	is, enter 73.7 highest number (		DIT. FEE L	opriate box			:	